Village of St Nazianz

Direct Payment Form

St. Nazianz Utilities offers a direct payment service. You can have your utility payment deducted automatically from your checking or savings account. And, you won't have to change your present banking relationship to take advantage of this service.

The Direct Payment Plan will help you in several ways:

- It saves time fewer checks to write.
- Helps meet your commitment in a convenient and timely manner --- even if you're on vacation or out of town.
- No lost or misplaced statements, your payment is always on time it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges.

Here's how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear with your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before the payment date.

The Direct Payment Plan is dependable, flexible, convenient, and easy. To take advantage of this service, complete the authorization form below and return it to the Village Office by mail or place it in the drop box at 110 Colonial Drive.

All you need to do is:

- 1. Check the box to indicate whether your payment will be deducted from your checking or savings account.
- 2. Fill in the date, your name and financial institution information.
- 3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize the <i>Village o</i>	St Nazianz to initiate electronic debit entries to my: Checking account Savings account	
• •	I understand I will receive a notice if the amount changes. I acknowledge that the origination at must comply with the provisions of US law. This authority will remain in effect until I have can	
Date	Name	
Financial Institution Nar	e (Please Print)	
Financial Institution City	and State	
Account Number at Fina	cial Institution	
Financial Institution Rou	ing/Transit Number (ABA)	

Signature of Authorized Signer

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS

RETURN COMPLETED FORMS TO:

Village of St Nazianz
228 W Main Street
PO Box 302
St Nazianz WI 54232
920-773-2471

Staple Voided Check Here